HOUSE BILL 746

2lr2947 CF SB 682

By: Delegate Kaiser

Introduced and read first time: February 3, 2022 Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

Maryland Medical Assistance Program – Gender–Affirming Treatment (Trans Health Equity Act of 2022)

- FOR the purpose of requiring, beginning on a certain date, the Maryland Medical
 Assistance Program to provide gender-affirming treatment; prohibiting the Program
 from issuing an adverse benefit determination related to gender-affirming
 treatment unless a health care provider with experience prescribing or delivering
 gender-affirming treatment has reviewed and confirmed the appropriateness of the
 determination; and generally relating to gender-affirming treatment and the
 Maryland Medical Assistance Program.
- 11 BY repealing and reenacting, without amendments,
- 12 Article Health General
- 13 Section 15–103(a)(1)
- 14 Annotated Code of Maryland
- 15 (2019 Replacement Volume and 2021 Supplement)
- 16 BY repealing and reenacting, with amendments,
- 17 Article Health General
- 18 Section 15–103(a)(2)(xvi) and (xvii)
- 19 Annotated Code of Maryland
- 20 (2019 Replacement Volume and 2021 Supplement)
- 21 BY adding to
- 22 Article Health General
- 23 Section 15–103(a)(2)(xviii) and 15–150
- 24 Annotated Code of Maryland
- 25 (2019 Replacement Volume and 2021 Supplement)
- 26 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
- 27 That the Laws of Maryland read as follows:



1	Article – Health – General
2	15–103.
$\frac{3}{4}$	(a) (1) The Secretary shall administer the Maryland Medical Assistance Program.
5	(2) The Program:
6 7 8 9 10 11 12 13	(xvi) Beginning on January 1, 2021, shall provide, subject to the limitations of the State budget and § 15–855(b)(2) of the Insurance Article, and as permitted by federal law, services for pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections and pediatric acute onset neuropsychiatric syndrome, including the use of intravenous immunoglobulin therapy, for eligible Program recipients, if pediatric acute onset neuropsychiatric disorders associated with streptococcal infections and pediatric disorders associated with streptococcal infections and pediatric disorders associated with streptococcal infections and pediatric acute onset neuropsychiatric for billing and diagnosis purposes in accordance with § 15–855(d) of the Insurance Article; [and]
$14 \\ 15 \\ 16 \\ 17$	(xvii) Beginning on January 1, 2022, may not include, subject to federal approval and limitations of the State budget, a frequency limitation on covered dental prophylaxis care or oral health exams that requires the dental prophylaxis care or oral health exams to be provided at an interval greater than 120 days within a plan year; AND
18 19 20	(XVIII) BEGINNING ON JANUARY 1, 2023, SHALL PROVIDE GENDER-AFFIRMING TREATMENT IN ACCORDANCE WITH § 15–150 OF THIS SUBTITLE.
21	15-150.
$\frac{22}{23}$	(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.
24 25 26 27 28	(2) (I) "GENDER-AFFIRMING TREATMENT" MEANS ANY MEDICALLY NECESSARY TREATMENT CONSISTENT WITH CURRENT CLINICAL STANDARDS OF CARE PRESCRIBED BY A LICENSED HEALTH CARE PROVIDER FOR THE TREATMENT OF A CONDITION RELATED TO THE INDIVIDUAL'S GENDER IDENTITY.
29	(II) "GENDER–AFFIRMING TREATMENT" INCLUDES:
$\begin{array}{c} 30\\ 31 \end{array}$	1. HORMONE THERAPY, HORMONE BLOCKERS, AND PUBERTY BLOCKERS;

HOUSE BILL 746

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12.HAIR ALTERATION FOR THE PURPOSES OF ALTERING2SECONDARY SEX CHARACTERISTICS AND SURGICAL SITE PREPARATION, INCLUDING3ELECTROLYSIS, LASER HAIR REMOVAL, HAIRPLASTY, HAIR TRANSPLANTATION, AND4MEDICAL TATTOOING FOR HAIR RECONSTRUCTION AND APPEARANCE OF SCAR;

5 3. LARYNGOPLASTY, VOICE MODIFICATION SURGERY,
6 VOICE THERAPY, AND VOICE LESSONS;

7 **4**. ALTERATIONS TO ABDOMEN, CHEST, TRUNK, AND 8 BUTTOCKS, INCLUDING ABDOMINOPLASTY, MASTECTOMY, BREAST REDUCTION AND 9 AUGMENTATION PROCEDURES, MASTOPEXY, NIPPLE AND AREOLA LIPOSUCTION, EXCISION OF 10 RECONSTRUCTION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE, PANNICULECTOMY, AUTOLOGOUS 11 FAT **GRAFTING**, AND DEOXYCHOLATE LIPOLYTIC 12PHOSPHATIDYLCHOLINE INTERVENTIONS, 13PLACEMENT OF HIP AND OTHER IMPLANTS, AND MEDICAL TATTOOING FOR NIPPLE 14**RECONSTRUCTION AND APPEARANCE OF SCAR;**

5. 15SURGERY TO THE FACE AND NECK, INCLUDING FACIAL BONE RECONSTRUCTION, FACIAL BONE REMODELING, GENIOPLASTY, 16 AUGMENTATION/CREATION/REDUCTION, 17MANDIBULAR ANGLE **ORBITAL** 18 **RECONTOURING**, LATERAL CANTHOPEXY, LYSIS INTRANASAL SYNECHIA, 19 SEPTOPLASTY, ORTHOGNATHIC SURGERY, TRANSORAL MANDIBULAR 20OSTEOPLASTY, PLACEMENT OF IMPLANTS TO THE CHEEK, FOREHEAD, CHIN, NOSE, 21JAW, AND LARYNGEAL PROMINENCE, BLEPHAROPLASTY, BROW LIFT, COLLAGEN 22INJECTIONS, INJECTION OF HYALURONIC ACID BASED SEMIPERMANENT 23MATERIALS, **AUTOLOGOUS** FAT GRAFTING, PHOSPHATIDYLCHOLINE AND 24DEOXYCHOLATE LIPOLYTIC INTERVENTIONS, FACE AND FOREHEAD LIFTS, RHYTIDECTOMY, NECK TIGHTENING, LIP REDUCTION AND ENHANCEMENT, THYROID 2526CHONDROPLASTY, TRACHEAL SHAVE, REMOVAL SKIN. OF REDUNDANT RHINOPLASTY, AND MEDICAL TATTOOING FOR LIP RECONSTRUCTION AND 2728**APPEARANCE OF SCAR;**

296. ТО THE SURGERY GENITALS AND GONADS. 30 CLITOROPLASTY, COLOVAGINOPLASTY, GLANSPLASTY, **INCLUDING** 31HYSTERECTOMY, LABIAPLASTY, AUTOLOGOUS FAT GRAFTING, PHOSPHATIDYLCHOLINE AND DEOXYCHOLATE LIPOLYTIC INTERVENTIONS, 32MEDICAL TATTOOING FOR GLANS RECONSTRUCTION AND APPEARANCE OF SCAR, 33 34 METOIDIOPLASTY, OOPHORECTOMY, ORCHIECTOMY, OVARIECTOMY, PENECTOMY, 35 PHALLOPLASTY, PLACEMENT OF A TESTICULAR PROSTHESIS AND PENILE SALPINGECTOMY, SALPINGO-OOPHORECTOMY, 36 PROSTHESIS SCROTECTOMY. 37 SCROTOPLASTY, URETHROPLASTY, VAGINECTOMY, VAGINOPLASTY, VULVECTOMY, 38 AND VULVOPLASTY;

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	4 HOUSE BILL 746
$\frac{1}{2}$	7. LASER TREATMENT FOR SCARS FROM GENDER-AFFIRMING TREATMENT;
$\frac{3}{4}$	8. STANDARD FERTILITY PRESERVATION PROCEDURES, AS SET FORTH IN § 15–810.1 OF THE INSURANCE ARTICLE;
$5 \\ 6$	9. REVISIONS TO PREVIOUS TREATMENTS AND REVERSAL OF TREATMENTS;
7 8	10.COMBINATIONSOFGENDER-AFFIRMINGPROCEDURES; AND
9 10 11 12 13	11. OTHER TREATMENTS AS PRESCRIBED TO SUPPRESS THE DEVELOPMENT OF ENDOGENOUS SECONDARY SEX CHARACTERISTICS, ALIGN THE INDIVIDUAL'S APPEARANCE OR PHYSICAL BODY WITH GENDER IDENTITY, AND ALLEVIATE SYMPTOMS OF CLINICALLY SIGNIFICANT DISTRESS RESULTING FROM GENDER DYSPHORIA.
14	(III) "GENDER-AFFIRMING TREATMENT" MAY:
$\begin{array}{c} 15\\ 16\\ 17\end{array}$	1. INCLUDE TREATMENT DESCRIBED IN THE CURRENT CLINICAL STANDARDS OF CARE FOR GENDER–AFFIRMING TREATMENT PUBLISHED BY THE WORLD PROFESSIONAL ASSOCIATION FOR TRANSGENDER HEALTH; AND
18 19	2. BE PRESCRIBED TO TRANSGENDER, NONBINARY, INTERSEX, TWO SPIRIT, AND OTHER GENDER DIVERSE INDIVIDUALS.
$\begin{array}{c} 20\\ 21 \end{array}$	(3) "Gender identity" has the meaning stated in § 20–101 of the State Government article.
22 23 24	(B) (1) THE PROGRAM SHALL PROVIDE COVERAGE FOR MEDICALLY NECESSARY GENDER-AFFIRMING TREATMENT IN A NONDISCRIMINATORY MANNER.
25 26 27	(2) THE GENDER-AFFIRMING TREATMENT SHALL BE ASSESSED ACCORDING TO NONDISCRIMINATORY CRITERIA THAT ARE CONSISTENT WITH CURRENT CLINICAL STANDARDS OF CARE.
$\frac{28}{29}$	(3) THE PROGRAM MAY NOT DENY OR LIMIT COVERAGE FOR GENDER-AFFIRMING TREATMENT WHEN THAT TREATMENT IS:
30 31	(I) PRESCRIBED TO A PROGRAM RECIPIENT BECAUSE OF, RELATED TO, OR CONSISTENT WITH THE RECIPIENT'S GENDER IDENTITY;

HOUSE BILL 746

(II) MEDICALLY NECESSARY; AND (III) PRESCRIBED IN ACCORDANCE WITH CURRENT CLINICAL STANDARDS OF CARE. (4) THE PROGRAM MAY NOT EXCLUDE GENDER-AFFIRMING TREATMENT, INCLUDING REVISIONS TO PRIOR GENDER-AFFIRMING TREATMENT, ON THE BASIS THAT THE TREATMENT IS A COSMETIC SERVICE.

7 THE PROGRAM MAY NOT ISSUE AN ADVERSE BENEFIT (5) 8 DETERMINATION DENYING OR LIMITING ACCESS TO GENDER-AFFIRMING TREATMENT UNLESS A HEALTH CARE PROVIDER WITH EXPERIENCE PRESCRIBING 9 OR DELIVERING GENDER-AFFIRMING TREATMENT HAS REVIEWED AND CONFIRMED 10 11 THE APPROPRIATENESS OF THE ADVERSE BENEFIT DETERMINATION.

(1) ON OR BEFORE DECEMBER 1 EACH YEAR, BEGINNING IN 2023, 12(C) EACH MANAGED CARE ORGANIZATION SHALL SUBMIT TO THE DEPARTMENT A 13 **REPORT THAT INCLUDES:** 14

15**(I)** THE NAME AND LOCATION OF EACH HEALTH CARE 16 PROVIDER OFFERING GENDER-AFFIRMING TREATMENT WITH WHICH THE MANAGED 17CARE ORGANIZATION HAS AN ACTIVE CONTRACT; AND

18 THE TYPES OF GENDER-AFFIRMING TREATMENT PROVIDED **(II)** BY EACH HEALTH CARE PROVIDER. 19

(I) ON OR BEFORE JANUARY 1 EACH YEAR, BEGINNING IN 20(2) 2024, THE DEPARTMENT SHALL COMPILE AN ANNUAL REPORT ON GEOGRAPHIC 21ACCESS TO GENDER-AFFIRMING TREATMENT ACROSS THE STATE. 22

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(II) THE REPORT SHALL INCLUDE:

241. THE NAME AND LOCATION OF EACH HEALTH CARE 25**PROVIDER OFFERING GENDER-AFFIRMING TREATMENT TO PROGRAM RECIPIENTS;**

262. THE MANAGED CARE ORGANIZATIONS THAT HAVE 27ACTIVE CONTRACTS WITH EACH HEALTH CARE PROVIDER; AND

28THE TYPES OF GENDER-AFFIRMING TREATMENT 3. 29**PROVIDED BY EACH HEALTH CARE PROVIDER.**

HOUSE BILL 746

1 (III) THE DEPARTMENT SHALL PUBLISH THE REPORT IN A 2 CONSPICUOUS MANNER ON THE DEPARTMENT'S WEBSITE.

3 (3) THE DEPARTMENT AND EACH MANAGED CARE ORGANIZATION 4 SHALL INCLUDE THE NAME, LOCATION, AND TYPES OF SERVICES FOR EACH 5 PROVIDER OFFERING GENDER-AFFIRMING TREATMENT IN THEIR PROVIDER 6 DIRECTORIES.

7 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 8 October 1, 2022.